



APGO MEMBERSHIP FORM

Association of Professors of Gynecology and Obstetrics

July 1, 2010-June 30, 2011

Fax this application to: (410) 451-9568

Individual Membership:

Individual Membership Dues - \$185/yr.

Individuals who have an interest in the objectives and activities of the Association and in academic gynecology and obstetrics are eligible to be Fellows.

This may include:

- Individuals who are faculty members in Member Departments, Associate Member Departments and Institutional Departments;
- Faculty members in affiliated and non-affiliated hospitals with teaching appointments and members of the uniformed services;
- Individuals who are not affiliated with a Member Department, Associate Member Department or Institutional Departments and have no teaching appointment, but have a genuine interest in academic gynecology and obstetrics, such as resident and clerkship coordinators.

Please complete this form:

This is how your information will appear in the APGO Directory:
(Submit by November 1, 2010 to be listed in the 2010-11 directory)

Name: _____

Institution: _____

Department: _____

Title: _____

Address: _____

City, State, Zip: _____

Phone: _____ Fax: _____

Email Address: _____

Tell us more about you:

Academic Title

- ____ Professor
 ____ Associate Professor
 ____ Assistant Professor
 ____ Instructor
 ____ Other _____

Academic Position

- ____ Division Chief
 ____ Clerkship Director
 ____ Residency Program
 Director
 ____ Chair
 ____ Clerkship Coordinator
 ____ Resident Coordinator

Payment for Your Membership:

Membership Dues: \$185
 Endowment Contribution + \$ 75*
 Total Cost (US Funds) = _____

Membership Payment Options:

___ Check ___ Visa ___ Mastercard ___ Online

*Contributions to the newly established APGO Educational Endowment Fund created to fund individual education grants that enhance the teaching of Ob-gyn.

Credit Card Information:

Name on Card: _____ Card Number: _____ Expires: _____

Credit Card Billing Address: _____ Zip Code: _____

Signature: _____